Senior Oversight Committee

Disability Evaluation System Pilot Program: Expansion Beyond the National Capital Region

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Overview

- LoA #1 – Disability Evaluation System

  - Pilot Update and Evaluation
  - Issues/lessons learned/Initiatives to improve
  - Pilot Limited Expansion Recommendation

What We're Trying to Fix

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PROBLEM: The Disability Evaluation System (DES) is complex, confusing, duplicative, adversarial, and lacks transparency and advocacy.

VISION: A seamless and transparent DES, within statute, administered jointly by DoD and the VA.

PILOT GOALS:

- Less complex and non-adversarial
- Faster, more consistent evaluations & compensation
- Single medical exam & single-source disability rating
- Seamless transition to Veteran status
- A continuum of care - advocacy & expectation management

DES Pilot Process - Review

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Treatment

Service member is wounded, injured or ill

Physician assesses and treats member

MEB

VA Medical Exam

Physical Exam

All Claimed Conditions

Case Development

Admin and Record transit

PEB

Informal Board

Unfit

Formal Board

Appeal

Admin and Record transit

VA Rating

VA Rating Panel – All conditions

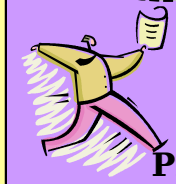
Proposed Rating

VA Rating Reconsideration

Disposition

Finalize DES Disposition

VA Claim & Benefits Letter



Process to Unit or for separation

Transition

Return to Duty

Separate or Retire

VA Benefits Start

VA Appeals

LoA #1 - Performance

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Process Improvement

- Time in Medical Evaluation Board (MEB) Phase
- Time in Physical Evaluation Board (PEB) Phase
- Time from separation to VA Benefits Letter
- Time from DES referral to VA Benefits Letter
- Development and fielding of automation enablers and IT as business process evolves

Customer Satisfaction

- Member and Veteran overall satisfaction with their treatment in the DES Pilot
- Member and Veteran satisfaction with the adequacy of DES Pilot case management support
- Veteran satisfaction with the Vocational Rehabilitation and Employment (VRE) process
- Veteran overall satisfaction with the DES Pilot one-year post separation

Financial Management

- Evaluate adequacy of funding support for Disability Exams
- Evaluate adequacy of funding support of DES automation enablers
- Evaluate adequacy of funding support of DES Information Technology Systems
- Evaluate adequacy of funding of DES Analysis & Evaluation systems

Learning & Growth

- Stakeholder satisfaction with DES Pilot training
- Stakeholder satisfaction with DES Pilot program information
- Stakeholder satisfaction with the availability of support and resources necessary to implement the DES Pilot program

Stoplight Key: On-track | Track | Off-track | Insufficient data

DES Pilot Enrollment

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DEPARTMENT	PILOT	NCR FY07	DES FY2007	COMMENT
Army	289 (43%)	450 (39%)	10,400 (52%)	•MTF dependent
Navy	247 (37%)	519 (45%)	4,931 (25%)	•MTF dependent
Air Force	130 (20%)	184 (16%)	4,591 (23%)	•Influx of backlog of cases with long-standing profiles
Overall	666	1,153	19,922	
Completed	- 76			•Includes members returned to duty, separated from military service with or w/o, and those placed on the TDRL/PDRL and issued their VA benefits letter.
Removed from the Pilot	- 27			•Includes members removed for miscellaneous reasons (e.g. departed the NCR, administratively discharged, deceased, etc).
Currently Enrolled in the	563			***Apart fr ve have no***

*Data as of Sept 2008

DES Comparisons

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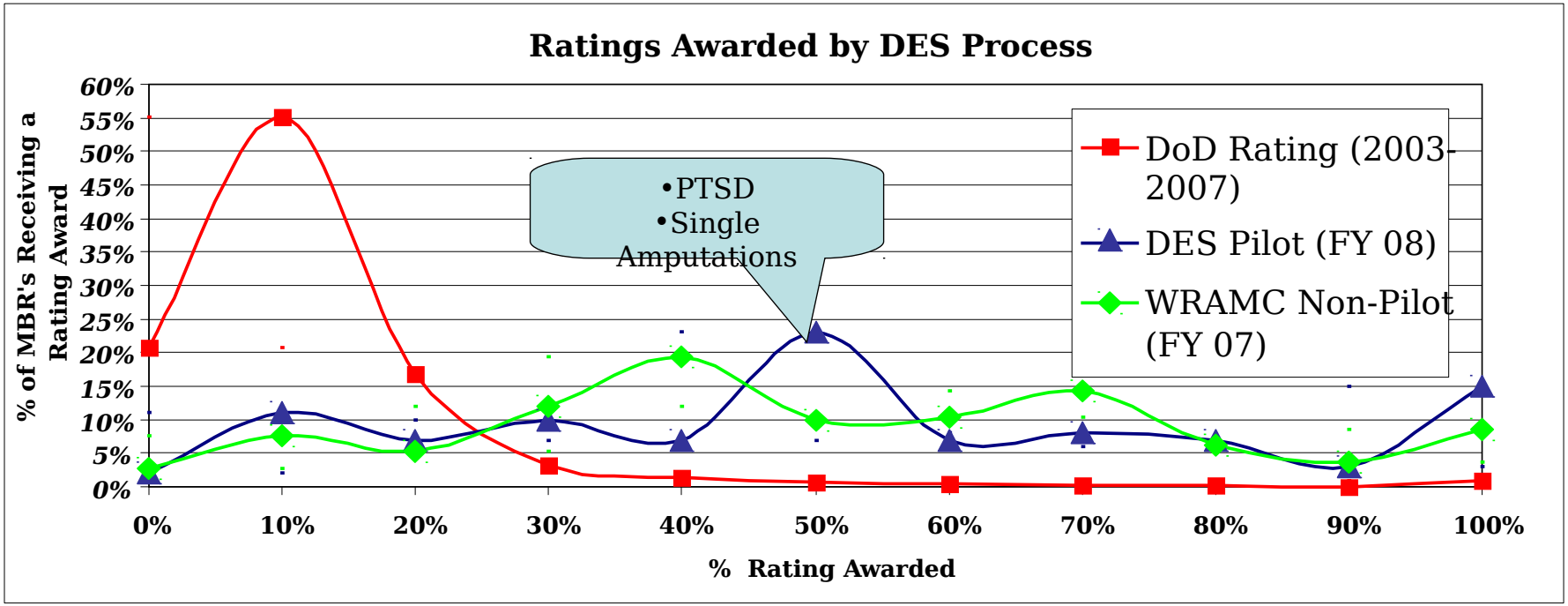
DISPOSITION	PILOT	NCR FY07	DES FY2007	COMMENT
Return to Duty	47 (30%)	220 (21%)	3,958 (20%)	• Pilot Includes Returned to Duty at MEB or PEB • DES FY2007 Returned to Duty at PEB
Separated w/ Severance	22 (14%)	230 (22%)	9,240 (46%)	• All accepted IPEB except for 2 requests for FPEB
Separated without Severance	3 (1%)	26 (3%)	1,150 (6%)	• All accepted IPEB except for 1 request for FPEB
Temporary Retirement List	45 (29%)	386 (38%)	4,278 (21%)	• VA panel higher rating & nature of cases in the NCR
Permanent Retirement List	38 (25%)	164 (16%)	1,296 (7%)	
Formal Boards	29 (11%)	123 (12%)	933 (5%)	• All accepted FPEB • 4 Found Fit for Duty
Appeals	0	20 (2%)	263 (1.3%)	
Reconsideration on Ratings	5			
Avg # Conditions referred versus	2 / 9		2 to 3	• Claimed conditions consistent with Benefits Delivery at Discharge Program

Apart[illegible] war itself, we have no

Pilot DES Disability Ratings Comparison



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DES Pilot Customer Feedback

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- **Compare satisfaction of DES Pilot to existing DES process**
  - Provide better understanding of WII Service members, their family, and other stakeholders
  - Determine appropriate pace, direction, and scope for expansion of Pilot
  - Contribute to DoD / VA policy adjustments and legislative initiatives
- **Survey Design includes 7 Dimensions**
  - Tangibles - (DoD / VA physical facilities & equip, DES personnel, DES communication materials)
  - Reliability – (Ability to execute DES tasks dependably and accurately)
  - Responsiveness – (willingness to help Service member and provide prompt service)
  - Assurance – (Knowledge and courtesy, ability to convey trust and confidence to Service members)
  - Empathy – (Caring, individualized attention paid to Service members)
  - Procedural Justice – (Belief in fairness of the process)
  - Distributive Justice – (Belief in fairness of the outcome)

DES Pilot Customer Feedback

- **10 Customer Feedback Surveys**
  - 4 Participant (MEB, PEB, Transition, Post Transition)
    - Adequacy of DES Pilot information, timing, process flow, benefit delivery etc.
  - 4 Comparison (MEB, PEB, Transition, Post Transition)
    - Adequacy of DES information, timing, process flow, etc.
  - 1 Family member
    - Satisfaction with process, timing, etc.
  - 1 Stakeholder
    - Adequacy of training / information, satisfaction with process, etc.

DES Pilot Survey Collection Results

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DES Pilot and DES

Service	Total Enrolled	Total in Process	MEB			PEB			Transition		
			Eligible	Completes	Completion Rate	Eligible	Completes	Completion Rate	Eligible	Completes	Completion Rate
Army	270	269	82	57	69.5%	44	20	45.5%	17	5	29.4%
Air Force	130	129	33	29	87.9%	12	8	66.7%	7	4	57.1%
Marine Corps	126	126	59	44	74.6%	31	23	74.2%	0	0	0.0%
Navy	104	103	50	48	96.0%	36	28	77.8%	1	0	0.0%
Total	*630*	*627*	*224*	*178*	*79.5%*	*123*	*79*	*64.2%*	*25*	*9*	*36.0%*

Stakeholder:

Service	Total	Completes	Completion Rate
Army	37	27	73.0%
Air Force	12	7	58.3%
Navy/Marine Corps	13	10	76.9%
DoD	2	0	0.0%
VA	9	7	77.8%
Total	*73*	*51*	*69.9%*

*Family:

Service	Total	Completes	Completion Rate
Army	2	0	0%
Air Force	1	0	0%
Navy/Marine Corps	0	0	0%
Total	*3*	0	

*** Family surveys started July 22, 2008. Note: Family members surveyed after the Service member completes the transition survey…5 eligible family members to date.**

Initial MEB Survey Analysis

Overall Descriptive Statistics for MEB Survey Findings (Number of 7/24 respondents: 65 out of 108)	Average Rating
Overall DES Experience - Satisfaction with overall DES Pilot experience	3.5
Overall Satisfaction with MEB - Satisfaction with case management, medical care and the MEB process in general	3.4
Timeliness of MEB Process - Timeliness of the process since entering the DES Pilot	3.3
Procedural Justice - Belief in fairness of the process	3.4
Distributive Justice - Belief in the fairness of the outcome of the process	3.2
Assurance - Courteousness received from the PEBLOs & MSCs and ability to speak one's mind	4.0
Empathy - Belief that PEBLOs & MSCs have the members' best interests in mind	3.8
Reliability - Belief that PEBLOs & MSCs execute DES tasks dependably and accurately	3.8
Responsiveness - PEBLOs & MSCs willingness to provide prompt service	3.6
Helpfulness - PEBLOs & MSCs willingness to be helpful to members and their families	3.5

1 – Very poor; **2** – Poor; **3** – A mix of poor and good; **4** – Good; and **5** – Very Good

Pilot MEB Timeliness

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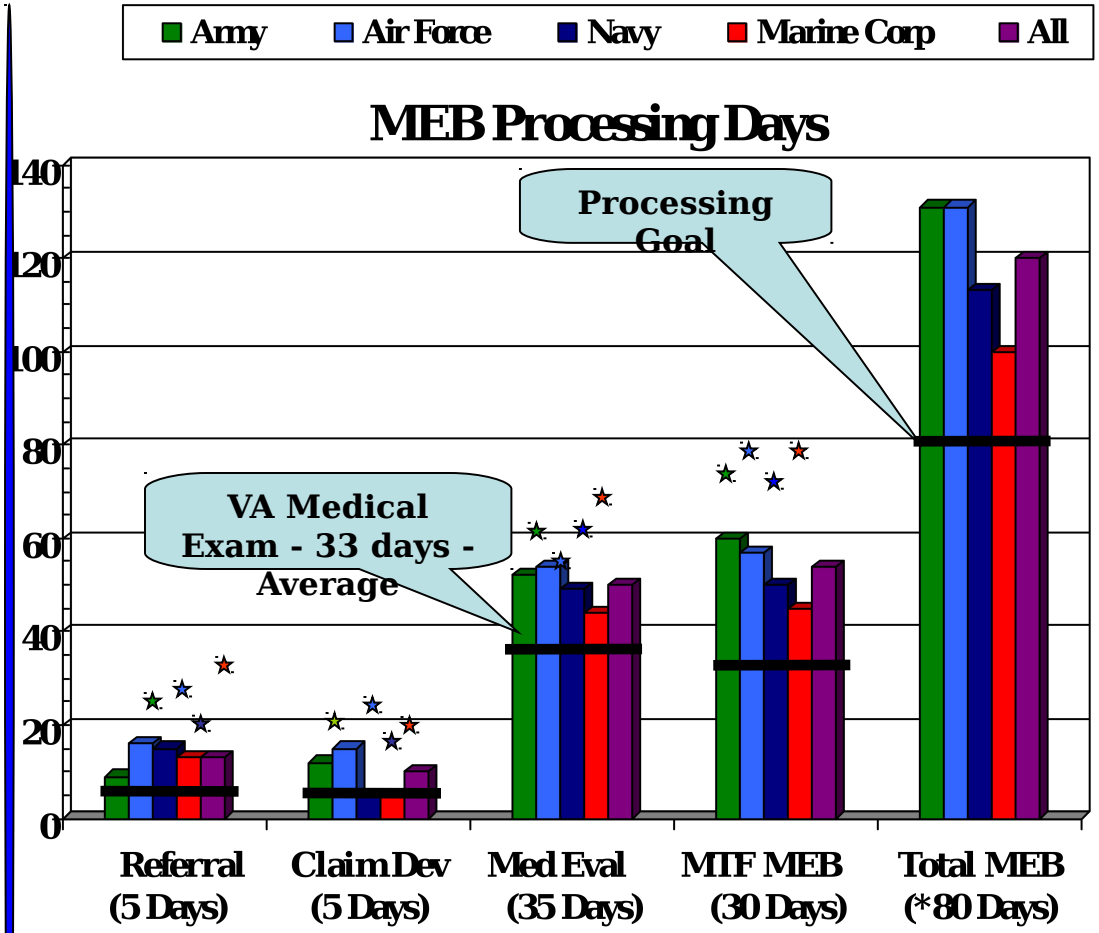
- **MEB Phase Processing**
  - Overall 120 days (40 days over 80 day goal)
- **Challenges**
  - PEBLO and MSC staffing
  - Developing case management tools
  - VA – DoD Systems Interoperability evolving – starts w/ Med Eval
  - Assembling complete STR/case file
  - NARSUM completion - complexity
  - Complexity of cases
  - GAO Draft Report
    - Increase case numbers and complexity
    - Logistics of single physical examination (no-shows, case management)
    - "Shortage" of physician specialties



*** Includes 5 days administrative processing for MEB Total**

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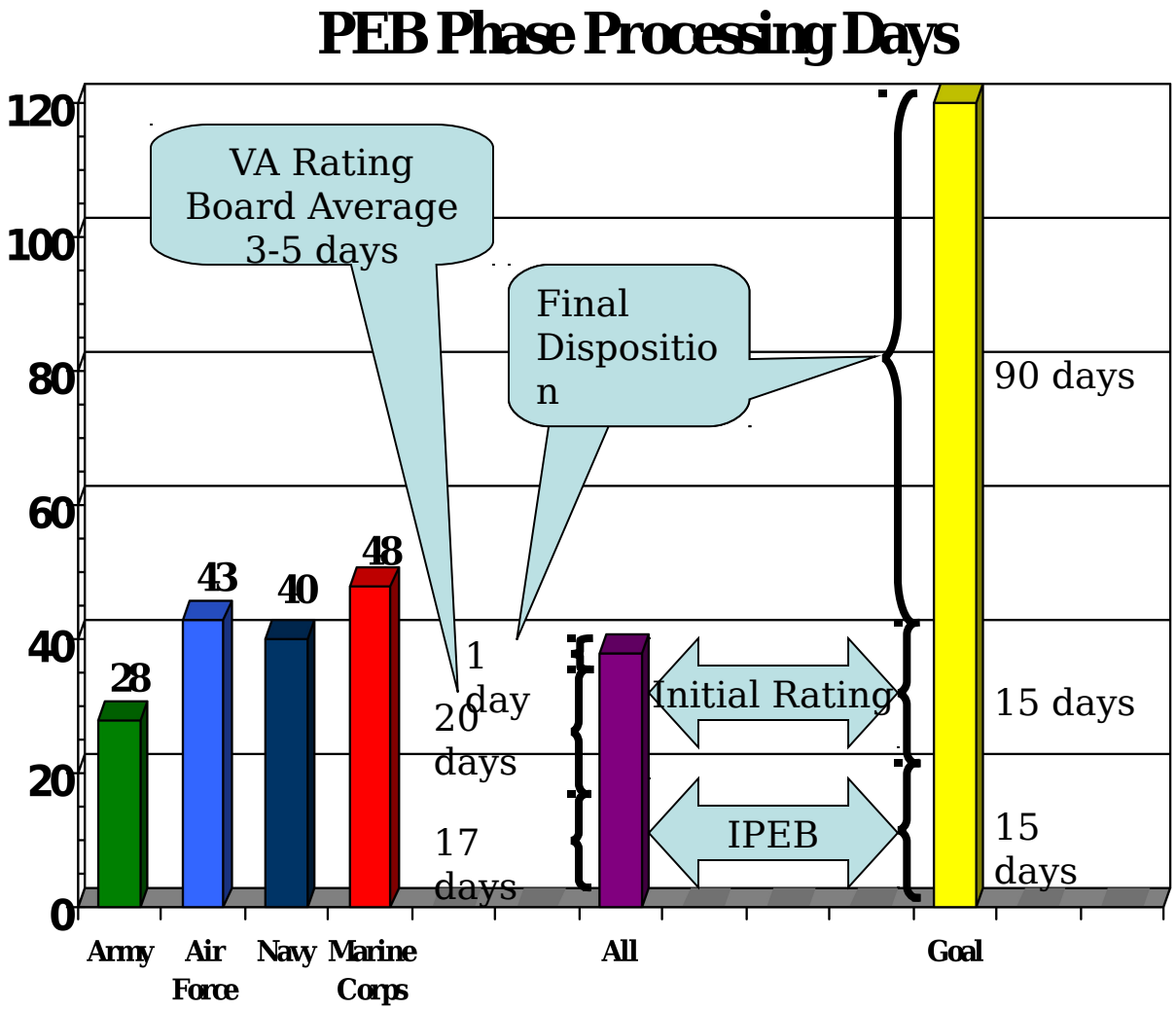
Pilot PEB Timeliness

- **PEB – Goal 120 Days**
  - Informal PEB = 15 days
  - Initial Rating = 15 days
    - Rating Board
    - Admin
  - Final Disposition
    - Formal PEB = 30 days
    - Rating Reconsideration=15 days
    - Appeal = 30 days
    - Admin Processing = 15 days
- **Within goal**



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MEB Efficiency Improvements

DEPARTMENT	ENHANCEMENTS
OSD	• Draft policies in coordination – Reiterated timeline standards and metrics; timeline standards for MEB consults referral to MEB optimum care or one year; implementation and standards for MEB appeals and legal representation – Established impartial MEB medical advisor; MEB maximum case load and backlog triggers for "as needed" MEB – Established MEB outreach/information standards – Established formal PEBLO roles and responsibilities • Information Technology and automation improvements – Progress in Medical Records BEC Working Group – Electronic Health Record (EHR) Interoperability – Evolving requirements defined for electronic capture of DES Pilot health information
Army	Formal PEBLO Training Program; Instituted WTU Survey Instrument to measure Soldier Satisfaction with clinical and admin processing of MEB; Army PDES process improvement review by Gen (R) Franks
Navy	On line MEB/DES Training Module.
Air Force	Developed automated MEB tracking system to provide real-time visibility/timeline of MEB process

Pilot Summary

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- **Lessons Learned:** DoD can accept ratings of VA Rating Panel; reaffirms issues in MEB phase; workflow management oversight and analytical tools are critical in a DoD-VA collaboration; issues between the two Departments require a resolution mechanism
- **Better:** Seamless, better advocacy, less duplication
- **Faster:** Average 180 days from Pilot entry to VA benefits decision
  - 67% reduction days for current DES and VA Claim process
  - 35% less than the 275-day initial projection for the Pilot
- **Fairer:** No decisions appealed to Military Secretary to date
- **Resources:** Requires interoperable systems and additional equipment
- **Education/Training:** Comprehensive training required to standardize the DES and ***then*** implement DES Pilot process
- **Automation Support:** Continues to evolve as business practice evolves -
  - Short term: Pilot case tracking
  - Mid term: "Off the Shelf" workflow and document management
  - Long term: Fully interoperable DoD-VA DES systems

GAO Draft Report on Expansion

- "…yet to finalize criteria for applying metrics to determine whether the pilot is worthy of eventual full-scale implementation."
- "…have yet to resolve key challenges associated with expanding the joint process."
  - VA exam no-shows
  - Logistical requirements in a larger expansion with regards to VA exam
  - Very case-management dependent
  - Unknown operational expenses in a full-scale implementation
- "DoD/VA should sustain collaborative executive focus and retain knowledgeable staff…"
- "Expanding the pilot to a few more locations may be prudent as a way to test the process under different conditions such as at locations lacking easy access to a VA medical facility for physical examinations."

Single Physical Examination

- **Draft DoD and VA Memorandum of Agreement**
  - VA and DoD collaboration
  - Provides for single Disability Evaluation/Transition examination of AD and RC Service members referred to DES.
- **Exam Content**
  - Comprehensive evaluation of both potentially military unfitting conditions identified by military providers and Service member-claimed conditions.
  - Veterans Benefits Administration Compensation & Pension Automated Medical Information Exchange (AMIE) Examination Worksheets will be used as guides for examiners.
- **Exam locations** - Exams performed at VA medical centers, MTFs, VA contracted centers, or by TRICARE network providers based on Service member's needs.
- **Training** - Medical providers performing and ordering examinations shall have training regarding the DES, AMIE worksheet criteria and exam requirements.
- **Funding**
  - Departments will share 50/50 responsibility or DoD pays for return to duty.
  - Estimated Cost: $1,400 per member ($3.5M annually for initial expansion).

Why Should We Expand?

Overall Purpose

- Stress the Pilot
- Expand outside the National Capital Region
- Increase data for decision making
- Add Guard/Reserve and Temporary Disability Retired List cases
- Phased expansion followed by implementation plan within 2010

Pilot Assessment Methodology

- Case data, survey & stakeholder feedback
- Performance measures
- Weekly status/Issues reports
- Are we achieving: simplicity, seamlessness, satisfaction, and timeliness goals.

Planning

- Series of joint planning meetings resulting in decision criteria
- DoD & VA agreement on scope: identify locations w/med-small output; mix of cases; mix of AC/RC; doable in 90 days; w/stable PEBLO base; challenging but doable; experience w/VA; one per month to support VA
- DoD & VA approval of assessment

Site Assessment Methodology

- Installation, Mil Dep and VA inputs
- Bottom-up estimating, expert judgment
- Site assessment stoplight chart
- Key components: resources, caseload and mix, facilities, connectivity, experienced PEBLO's, & ease of facilitating the medical exam procedures

Lessons Learned

- Department of Defense can use a VA single physical and rating to establish fitness and disability level
- DES Process can be significantly shortened
- Wait times for VA benefits can be eliminated
- PEBLO and MSC manning levels critical to DES Pilot process
- VA IT connectivity directly impacts the timeliness/quality of service
- Common Access Card standardization across Departments/Services
- Need for long term strategic IT plan
  - Different systems across Services/VA lack interfaces necessary to streamline process
- Automated Service Treatment Record a necessity
  - High speed copiers/scanners offer an interim solution
- Develop integrated training for clinicians and case managers

Expansion Sites Considered

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Mil Dep	Location	Assessment		Rationale	Est. Cases	BDD
		DoD	VA			
Army	Ft Belvoir/Ft Meade	2	1	Army RC not fully in WRAMC catchment	20	✓
Army	Ft Stewart	3 4	3 4	Resources Training	47	✓
Army	Ft Drum	5	5	Resources Training	30	
Army	Ft Richardson	1 2	1 2	Resources Training	30	✓
Army	Ft Carson	3	3	Resources Training	120	✓
Army	Ft Polk	1	1	Resources Training	40	
Navy	NMC San Diego	2 3	2 3	Resources Training	80	✓
Navy	Naval Hospital Bremerton	4 5	4 5	Resources Training	11	✓
Navy	Naval Hospital Jacksonville			Resources	24	✓

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Questions?